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**UTILITY
PATENT APPLICATION
TRANSMITTAL**

(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))

Attorney Docket No.	071308.0441
First Inventor or Application Identifier	Johannes Kroizsch
Title	Arrangement for Monitoring at Least One
Express Mail Label No.	EV339222885US

**APPLICATION ELEMENTS**

See MPEP chapter 600 concerning utility patent application contents.

- | | |
|--|--|
| 1. <input checked="" type="checkbox"/> * Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing) | 5. <input type="checkbox"/> Microfiche Computer Program (Appendix) |
| 2. <input checked="" type="checkbox"/> Specification [Total Pages 22]
(preferred arrangement set forth below) | 6. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary) |
| <ul style="list-style-type: none"> - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference to Microfiche Appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure | |
| 3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 2] | 7. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) |
| 4. Oath or Declaration [Total Pages] | 8. <input type="checkbox"/> 37 C.F.R. § 3.73(b) Statement <input type="checkbox"/> Power of
(when there is an assignee) <input type="checkbox"/> Attorney |
| a. <input type="checkbox"/> Newly executed (original or copy) | 9. <input type="checkbox"/> English Translation Document (if applicable) |
| b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d))
(for continuation/divisional with Box 16 completed) | 10. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS
Citations |
| i. <input type="checkbox"/> DELETION OF INVENTOR(S)
Signed statement attached deleting
inventor(s) named in the prior application,
see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b). | 11. <input type="checkbox"/> Preliminary Amendment |
| 12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)
(Should be specifically itemized) | |
| 13. <input type="checkbox"/> * Small Entity Statement(s) <input type="checkbox"/> Statement filed in prior application,
(PTO/SB/09-12) <input type="checkbox"/> Status still proper and desired | |
| 14. <input checked="" type="checkbox"/> Certified Copy of Priority Document(s)
(if foreign priority is claimed) | |
| 15. Other: | |

[NOTE FOR ITEMS 1 & 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).]

16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:

Continuation Divisional Continuation-in-part (CIP) of prior application No: _____ / _____

Prior application information: Examiner _____ Group / Art Unit: _____

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS

<input type="checkbox"/> Customer Number or Bar Code Label	(Insert Customer No. or Attach bar code label here)			or <input checked="" type="checkbox"/> Correspondence address below	
Name					
Address	Baker Botts L.L.P. 910 Louisiana Street				
City	Houston	State	Texas	Zip Code	77002-4995
Country	USA	Telephone	713-229-1234	Fax	713-229-1522
Name (Print/Type)	Bruce W. Slayden II		Registration No. (Attorney/Agent)	33,790	
Signature			Date	6-25-03	

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

17175
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PTO
06/25/03Approved for use through 10/31/2002. OMB 0651-0032
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FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 750.00)

Complete if Known

Application Number	
Filing Date	June 25, 2003
First Named Inventor	Johannes Kroizsch
Examiner Name	
Group Art Unit	
Attorney Docket No.	071308.0441

METHOD OF PAYMENT

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number	
Deposit Account Name	

Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

Applicant claims small entity status. See 37 CFR 1.27

2. Payment Enclosed:

Check Credit card Money Order Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Small Entity

Fee Code (\$)	Fee (\$)	Fee Code (\$)	Fee Description	Fee Paid
101	740	201	370 Utility filing fee	750.00
106	330	206	165 Design filing fee	
107	510	207	255 Plant filing fee	
108	740	208	370 Reissue filing fee	
114	160	214	80 Provisional filing fee	

SUBTOTAL (1) (\$ 750.00)

2. EXTRA CLAIM FEES

Total Claims	18	-20** =	X	= 0.00
Independent Claims	2	- 3** =	X	= 0.00
Multiple Dependent				

Large Entity Small Entity

Fee Code (\$)	Fee (\$)	Fee Code (\$)	Fee Description
103	18	203	9 Claims in excess of 20
102	84	202	42 Independent claims in excess of 3
104	280	204	140 Multiple dependent claim, if not paid
109	84	209	42 ** Reissue independent claims over original patent
110	18	210	9 ** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ 0.00)

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee (\$)	Fee Description	Fee Paid
105	130	205	65 Surcharge - late filing fee or oath	
127	50	227	25 Surcharge - late provisional filing fee or cover sheet	
139	130	139	130 Non-English specification	
147	2,520	147	2,520 For filing a request for ex parte reexamination	
112	920*	112	920* Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840* Requesting publication of SIR after Examiner action	
115	110	215	55 Extension for reply within first month	
116	400	216	200 Extension for reply within second month	
117	920	217	460 Extension for reply within third month	
118	1,440	218	720 Extension for reply within fourth month	
128	1,960	228	980 Extension for reply within fifth month	
119	320	219	160 Notice of Appeal	
120	320	220	160 Filing a brief in support of an appeal	
121	280	221	140 Request for oral hearing	
138	1,510	138	1,510 Petition to institute a public use proceeding	
140	110	240	55 Petition to revive - unavoidable	
141	1,280	241	640 Petition to revive - unintentional	
142	1,280	242	640 Utility issue fee (or reissue)	
143	460	243	230 Design issue fee	
144	620	244	310 Plant issue fee	
122	130	122	130 Petitions to the Commissioner	
123	50	123	50 Processing fee under 37 CFR 1.17(q)	
126	180	126	180 Submission of Information Disclosure Stmt	
581	40	581	40 Recording each patent assignment per property (times number of properties)	
146	740	246	370 Filing a submission after final rejection (37 CFR § 1.129(a))	
149	740	249	370 For each additional invention to be examined (37 CFR § 1.129(b))	
179	740	279	370 Request for Continued Examination (RCE)	
169	900	169	900 Request for expedited examination of a design application	
Other fee (specify) _____				

*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$ 0.00)

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Bruce W. Slayden II	Registration No. (Attorney/Agent)	33,790	Telephone	713-229-1234
Signature				Date	6-25-03

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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